

Maryland State Department of Education
Division of Career Technology and Adult Learning
Correctional Education Program

OPEN AND CONTINUOUS RECRUITMENT

Complete the following information and enclose this form with your application

Applicant's Name: _____

Address: _____

Telephone: _____

POSITION FOR WHICH APPLYING (Check only one per application):

- | | | |
|---|--|---|
| <input type="checkbox"/> Teacher, Correctional Special Education | <input type="checkbox"/> Teacher, Juvenile Special Education | <input type="checkbox"/> School Psychologist |
| <input type="checkbox"/> Teacher, Correctional Adult Education | <input type="checkbox"/> Teacher, Supervisor/Asst Principal | <input type="checkbox"/> Librarian/Media Specialist |
| <input type="checkbox"/> Teacher, Juvenile Academic Education | <input type="checkbox"/> Principal | |
| <input type="checkbox"/> Computer Literacy <input type="checkbox"/> Math <input type="checkbox"/> Life Skills | <input type="checkbox"/> Other (Please Specify): _____ | |
| <input type="checkbox"/> Reading/Lang Arts <input type="checkbox"/> Science <input type="checkbox"/> Social Studies | | |

CERTIFICATION:

Have you been or are you currently certified? ☐ Yes ☐ No Expiration Date: _____
What State are you certified in? ☐ MD ☐ Other (Please Specify): _____
What type of certificate? ☐ APC ☐ SPC ☐ Conditional ☐ Other: _____

What area (Check all that apply):

- | | | | | |
|--|-----------------------------------|--|---------------------------------------|---|
| <input type="checkbox"/> Secondary | <input type="checkbox"/> Admin I | <input type="checkbox"/> School Psychologist | <input type="checkbox"/> Math | <input type="checkbox"/> Social Studies |
| <input type="checkbox"/> Elementary | <input type="checkbox"/> Admin II | <input type="checkbox"/> Media Specialist | <input type="checkbox"/> Science | <input type="checkbox"/> Librarian |
| <input type="checkbox"/> Special Education | <input type="checkbox"/> Reading | <input type="checkbox"/> Language | <input type="checkbox"/> Other: _____ | |

If not certified (Check all that apply):

- | | | |
|---|--|-------------|
| <input type="checkbox"/> Passed SLLA | <input type="checkbox"/> Scheduled for Praxis Exam | Date: _____ |
| <input type="checkbox"/> Passed Praxis I | <input type="checkbox"/> Passed NTE | |
| <input type="checkbox"/> Passed Praxis II | <input type="checkbox"/> Plan to take Praxis | Date: _____ |

If available, please attach a copy of the most recent certificate.

Willing to work: ☐ Part-time ☐ Full-time

Are you willing to work in two or more facilities? ☐ Yes ☐ No In the evenings? ☐ Yes ☐ No

REGIONS YOU ARE WILLING TO WORK (Check all that apply):

☐ Anywhere in the State

Eastern Region

- ☐ Somerset County
☐ Queen Anne's County

Western Region

- ☐ Allegany County
☐ Washington County

Central Region

- ☐ Anne Arundel County
☐ Baltimore City
☐ Howard County

☐ Charles H. Hickey, Jr. School (Juvenile Facility located in Cub Hill, Maryland - Baltimore County)